

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000038043

FILED
Apr 07, 2004
Secretary of State

Entity Name: PERFECT ENTERPRISES TREE DIVISION INC.

Current Principal Place of Business:

5952 MORNINGSIDE DR.
LAKE WORTH, FL 33463

New Principal Place of Business:

7425 HYPOLUXO FARMS ROAD
LAKE WORTH, FL 33463

Current Mailing Address:

5952 MORNINGSIDE DR.
LAKE WORTH, FL 33463

New Mailing Address:

7425 HYPOLUXO FARMS ROAD
LAKE WORTH, FL 33463

FEI Number: 04-3660934

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAPRELIAN, TAMIE J
5952 MORNINGSIDE DR.
LAKE WORTH, FL 33463

Name and Address of New Registered Agent:

KAPRELIAN, TAMIE J
7425 HYPOLUXO FARMS ROAD
LAKE WORTH, FL 33463

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

04/07/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KAPRELIAN, BRIAN W
Address: 5952 MORNINGSIDE DR.
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: KAPRELIAN, BRIAN H
Address: 7425 HYPOLUXO FARMS ROAD
City-St-Zip: LAKE WORTH, FL 33463

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN H KAPRELIAN

PD

04/07/2004

Electronic Signature of Signing Officer or Director

Date